



Breast Enlargement through Visual Imagery and Hypnosis

Richard D. Willard M.D.

To cite this article: Richard D. Willard M.D. (1977) Breast Enlargement through Visual Imagery and Hypnosis, American Journal of Clinical Hypnosis, 19:4, 195-200, DOI: [10.1080/00029157.1977.10403875](https://doi.org/10.1080/00029157.1977.10403875)

To link to this article: <https://doi.org/10.1080/00029157.1977.10403875>



Published online: 20 Sep 2011.



Submit your article to this journal [↗](#)



Article views: 113



View related articles [↗](#)



Citing articles: 1 View citing articles [↗](#)

Breast Enlargement Through Visual Imagery and Hypnosis

RICHARD D. WILLARD, M.D.
Institute of Behavioral and Mind Sciences

Twenty-two female volunteers ranging in age from nineteen to fifty-four were asked to practice self-hypnosis and visual imagery in an attempt to enlarge the breasts. All subjects had some enlargement. The subjects who were able to visualize the greatest percentage of times tried had the greatest increase in breast size.

In 1973, Baker presented a paper on the psychosexual dynamics of patients undergoing mammary augmentation. He reported, "Augmentation mammoplasty is becoming one of the most frequently requested cosmetic operations in the United States." He also reported the increased demand for augmentation indicates that there are thousands of women with feelings of inadequacy about the size of their breasts. His study revealed many positive affects of the increased breast size that were reported by patients following surgery, including increased interest in sex, increased frequency of intercourse and increased ability to climax. Two patients reported that they obtained orgasm for the first time. They all reported feeling happier in all areas of life with decreased self-consciousness and increased self-esteem. His study also found that, "Many felt that their interpersonal and marital relationships improved."

Many authors have studied the psychological and physical aspects of breast augmentation (Hurwitz, 1974; Fisher, 1973; DeSaxe, 1974). There are thousands of augmentation mammoplasties done yearly. It would appear from the statistics that this number is still on the increase. Although advances in surgery and

anesthesia continue to reduce the risk, it was felt an alternative method of breast augmentation should be investigated.

The use of visual imagery to affect physiological responses has been studied by Simonton, O. C. and Simonton, S. S., 1975; Reeves and Segal, 1973; Redmond, Gaylor, McDonald and Shapiro, 1974; Clark and Forgione, 1974. Psychobiological changes can be obtained by hypnotic suggestion which are quite impossible to achieve in the normal waking state (Wolberg, 1948; CanPelt, 1964; Reiter, 1965). The successful use of hypnosis to stimulate breast growth was demonstrated by Williams, 1974. After consideration of the success which has been obtained with visual imagery in affecting physiological responses and after reviewing Williams' work on the use of hypnosis for breast growth, it was decided to initiate a study using the visual imagery and hypnosis in order to attempt to obtain breast enlargement by combining the visual imagery with hypnosis.

EXPERIMENT

Method

Subjects. The subjects consisted of 22 female volunteers. These subjects were obtained by placing a notice for volunteers on

the bulletin board of a local university. The ages ranged from 19 to 54 years of age with a mean of 28. Forty percent were on birth control pills. Those on birth control pills at the beginning of the study were still on them at the conclusion. The subjects took no medication just before or during the study except those on the birth control pills. No other form of breast augmentation was used by the subjects during the period of the study.

Measurements. There were five individual breast measurements taken at the beginning of the study, at six weeks and at twelve weeks. The data presented here will be from the first twelve weeks. The study is being continued at this time at the request of some of the subjects. The circumference is the measurement around the chest at the nipple line with sufficient pressure to pull the nipple down flat with the surrounding breast tissue. Bilateral-vertical measurements were taken from the midclavicular line with the edge of the tape at the inferior edge of the clavicle down over the nipple to the base of the breast. Bilateral-horizontal measurements were taken from the anterior-axillary line over the nipple to the mid-sternum. A physician who was not involved in the design of the experiment made the measurements.

Procedure. The subjects had a practice session in the clinic once a week for the first six weeks and every two weeks for the second six weeks. Using cassette tapes, the subjects were asked to visualize a wet, warm towel over their breasts and to allow this to produce a feeling of warmth. If they were unable to obtain the feeling of warmth with this visualization, they were to add the visualization of a heat lamp shining on the warm towel to facilitate the feeling of warmth. After they were able to obtain a feeling of warmth in the breasts, they were then asked to concentrate on a feeling of pulsation in the breasts, becoming cognizant of their heartbeat and allowing the

heartbeat or pulsation from the heart to flow into the breasts. They were then instructed to practice the same imagery and relaxation at home once a day. On the initial visit, each patient was induced into a hypnotic trance using the standard arm levitation method and then instructed in progressive relaxation as a means of obtaining a light trance. They were asked to practice the progressive relaxation on each visit to the clinic as well as in their practice sessions at home. Each patient kept a record of the total number of practice sessions, the total number of times they obtained the feeling of warmth and the total number of times they obtained a feeling of pulsation.

RESULTS

At the end of 12 weeks, 28% had reached the goal they had set at the beginning of the program and desired no further enlargement. There were 85% who could tell a significant enlargement in their breasts had been accomplished, and 46% found it necessary to buy a larger brassiere. Forty-two percent had a loss in weight of greater than 4 pounds and still had enlargement of their breasts. The average increase in circumference was 1.37 inches; the average increase in the vertical measurement was 0.67 inches and the average increase in horizontal measurement was 1.01 inches. It was gratifying to note that 78% of the subjects noticed other positive changes in their lives while participating in the experiment, such as: better bowling scores, improved golf games, etc. At the end of 12 weeks, 85% of the patients could obtain a spontaneous feeling of warmth or pulsation in their breasts by just thinking about the breasts or drawing their attention to their breasts while doing other things, such as driving a vehicle, working, watching television, etc.

In this study, 63% of the subjects had had children and complained of pendulous

breasts. These subjects expressed a desire to regain the fullness and contour of the breasts which they had before the pregnancies. All of these subjects reported they were very pleased with the increase in fullness and firmness of their breasts at the end of the study.

The subjects were asked to practice once a day at home. A record was made of the number of times practiced, the number of times they obtained the feeling of warmth, and the number of times they obtained the feeling of pulsation. Some of the subjects practiced more than once a day; therefore, their percent times practiced were logged at greater than one hundred percent. The percent of times warmth and pulsation was obtained was calculated as a function of the number of times practiced versus the number of times obtained. This is shown in Table 1.

There was no direct or indirect correlation between the total number of times the

exercise was practiced, the total number of times the warmth or pulsation was felt and the amount of increase in the breast size. Contrary to speculation at the beginning of the experiment, the size of the breasts at the beginning of the experiment could not be correlated with the amount of increase that was obtained.

It would appear from this study, that the subjects who were able to obtain visual imagery, quickly, easily and a large percent of the time that they attempted it, had the greatest increase in the mass or the size of their breasts. As actual blood flow studies were not done in this part of the program, nor were we able to measure vascular dilatation, the actual mechanism or reason for the growth was not elicited. It is felt that further study should be done to determine the actual cause or mechanism of this enlargement and growth. The only two subjects who subjectively felt there had been no significant increase, did have a measurable

TABLE I

Pat. No.	6 Weeks			12 Weeks		
	% Practice	% Warmth	% Pulse	% Practice	% Warmth	% Pulse
101	119	67	24	103	88	50
102	96	94	100	52	100	100
103	95	100	100	60	100	100
104	83	69	70	71	100	100
105	92	7	80	68	0	100
106	92	71	100	88	100	100
107	85	87	73	44	100	100
108	55	70	40	66	83	83
109	100	100	89	88	67	67
110	118	49	55	125	49	49
111	85	79	79	17	50	50
112	95	90	22	28	33	33
113	112	48	20	100	55	7
114	80	113	81	93	72	76
115	103	100	100	63	100	100
100	185	60	87	158	83	83
117	88	48	48	14	88	57
118	89	72	77	81	100	100
119	82	63	31	98	100	100
120	108	100	100	100	100	100
121	94	80	80	109	100	100
122	100	2	1	91	0	0

increase in size. Both subjects had difficulty obtaining the visualizations. All of the subjects reported an increase in firmness of the breasts. All of the subjects who began the study with one breast smaller than the other found them to be equal in size at the end of the twelve weeks. Table 2 shows the circumference measurements before treatment and at twelve weeks and the mean vertical and horizontal measurements in the beginning and at twelve weeks.

There are many questions which remain unanswered in this study. Number one — What is the mechanism of the growth which occurs? Number two — What length of time is required for the majority of the subjects to reach their stated goal? Number three — Is continued practice necessary to maintain the growth already obtained and if so, what frequency of practice would be necessary to accomplish this? Number four — Are there better techniques or methods

of visual imagery or better techniques or methods other than visual imagery to obtain the same results? Number five — the main reason for doing this experiment with breast enlargement was to see if it was possible to make an organ enlarge or grow through visual imagery in order to ask this most important question: If it is possible through visual imagery to enlarge the breasts, external organs, then might it be possible through visual imagery to enlarge other organs internally, such as the kidney, liver, spleen, heart, or lung?

DISCUSSION

As Williams found in his study, it appears that one is able to affect enlargement of the breasts through hypnosis and from this study, it would appear visual imagery may be a tool or adjunct to this. In the study done by Williams, age regression to the time when the breasts were growing was

TABLE 2
Breast Measurements

<i>Subject</i>	<i>Circumference</i>		<i>Mean Vertical</i>		<i>Mean Horizontal</i>	
	<i>Start</i>	<i>12 Weeks</i>	<i>Start</i>	<i>12 Weeks</i>	<i>Start</i>	<i>12 Weeks</i>
101	35.00	36.00	9.50	10.00	9.5	10.50
102	32.00	33.00	8.25	9.50	6.75	8.25
103	35.00	35.50	9.25	9.75	8.50	9.00
104	41.00	44.25	12.00	12.50	10.00	11.50
105	33.00	34.00	9.00	9.00	7.00	8.00
106	34.25	35.50	10.75	12.75	8.25	9.25
107	34.00	36.00	9.00	9.50	8.50	9.75
108	38.50	39.50	9.00	9.50	8.00	9.00
109	34.50	36.00	9.50	11.00	8.00	9.50
110	30.25	31.50	7.50	7.75	6.00	6.50
111	36.00	37.50	11.00	12.50	9.50	11.00
112	34.50	36.50	9.50	10.25	8.00	9.25
113	30.00	30.50	8.00	9.00	6.50	8.00
114	31.00	32.75	8.00	8.50	6.50	7.00
115	36.00	39.25	13.50	14.00	10.00	11.25
116	32.00	33.75	10.00	11.00	8.50	9.00
117	33.00	34.50	9.50	10.00	8.00	8.50
118	33.00	33.50	9.00	9.50	7.75	8.50
119	32.00	32.50	9.00	9.50	7.50	7.75
120	34.00	34.75	11.25	12.50	8.25	10.00
121	33.00	34.50	9.25	9.75	7.50	8.75
122	28.00	29.00	8.75	9.00	6.00	6.50

used to recapture the feeling and sensation of the breasts enlarging. He also age progressed the subjects to a time when the breasts would be the size they desired. This technique requires a direct operator-to-subject relationship. The time element therefore limits the number of people who can be treated at any one time.

One of the purposes of the present study was to see if the instructions and visual imagery could be accomplished by a cassette tape program effectively. There were 20 of the 22 subjects who felt the instructions and the method was satisfactory and were able to visualize as requested. The other two felt the instructions and the method as satisfactory but were unable to visualize as requested. By using self-hypnosis and visual imagery, the operators time was minimal (1 hour and 15 minutes per subject for 12 weeks) and the subjects were given a technique they could utilize anytime.

There has been considerable speculation for some time on the possibility of the human to be able to increase or decrease the circulation to a given area of the body. The use of biofeedback has shown that one can definitely warm or increase the circulation in a given area of the body (Green, E. E., Green, A. M. & Walter, E. D., 1970). Whether we may someday be able to shut off the blood flow to a cancerous tumor by biofeedback or through visual imagery is pure speculation. Until we better understand the role of the "host's immune mechanism" in combating cancer, we cannot be sure if it would be better to shut off the blood flow to starve the tumor or to increase the blood flow to increase the availability of the host's defense mechanism.

All of these questions remain unanswered but are certainly worth investigation.

SUMMARY

This report reveals the results after 12 weeks of teaching the subjects relaxation

and visual imagery in an attempt to enlarge the breasts. All subjects had some increase in breast size. Twenty-eight percent of the subjects obtained the goal they had set at the beginning of the experiment. Eighty-five percent were aware of a significant increase in their breasts, and 46% found it necessary to increase their brassiere size due to the enlargement which occurred. Forty-two percent of the subjects had a spontaneous weight loss greater than four pounds and still had an enlargement of the breasts. It would appear from the study that the subjects who were able to obtain the visual imagery, quickly, easily and a large percent of the time have the greatest increase in the size of their breasts. This preliminary report shows that through hypnosis and visual imagery, the size of an organ can be affected and, specifically in this experiment, can be enlarged. As in most research, it produces as many questions as answers. It is my hope that this paper may stimulate even greater questions and speculations to the possibilities visual imagery may hold for the science of the mind.

107 Three Rivers North
Forty Wayne, Indiana 46802

REFERENCES

- BAKER, J. L. JR., KOLIN, I. S., & BARTLETT, E. S. Psychosexual dynamics of patients undergoing mammary augmentation. *Plastic & Reconstructive Surgery*, June, 1974, 652-659.
- CLARK, R. E. & FORGIONE, A. G. Gingival and digital vasomotor response to thermal imagery in hypnosis. *Journal of Dental Research*, 1974, 53, 792-796.
- DESAXE, B. M. Breast augmentation. *South African Medical Journal*, 1974, 737-740.
- FISHER, S. Aniseikonic perception by women of their own breasts. *Perceptual and Motor Skills*, 1973, 36, 1021-1022.
- FUCHS, K., HOCH, Z., PALDI, E., ABRAMOVICI, H., BRANDES, M. M., TIMOR-TRITSCH, I., & KLEINHAUS, M. Hypno-desensitization therapy of vaginismus: Part I. "In Vitro" Method. Part II. "In Vivo" Method. *International Journal of Clinical and Experimental Hypnosis*, 1973, 21, 144-156.

- GREEN, E. E., GREEN, A. M., & WALTER, E. D. Voluntary control of internal states: Psychological and physiological. *Journal of Transpersonal Psychology*, 1970, 2, 1-26.
- HURWITZ, A. Enhancing a symbol of beauty. *Australian Nurses' Journal*, 1974, 3, 13-18.
- REDMOND, D. P., GAYLOR, M. S., McDONALD, R. H. JR., & SHAPIRO, A. P. Blood pressure and heart-rate response to verbal instruction and relaxation in hypertension. *Psychosomatic Medicine*, 1974, 36, 285-297.
- REEVES, A. & SEGAL, S. J. Effects of visual imagery on visual sensitivity and pupil diameter. *Perceptual and Motor Skills*, 1973, 36, 1091-1098.
- REITER, P. J. The influence of hypnosis on somatic fields of function. In L. M. Le Cron (Ed.). *Experimental Hypnosis*. New York: Citadel Press, 1965.
- SIMONTON, O. C., & SIMONTON, S. S. Belief systems and management of the emotional aspects of malignancy. *Journal of Transpersonal Psychology*, 1975, 29-47.
- VANPELT, S. J. Will hypnosis revolutionize medicine? In R. Rhodes (Ed.), *Therapy Through Hypnosis*. New York: Citadel Press, 1964.
- WILLIAMS, J. E. Stimulation of breast growth by hypnosis. *Journal of Sex Research*, 1974, 10, 316-326.
- WOLBERG, L. R. *Medical hypnosis*. New York: Grune & Stratton, 1948.